



## NEW JERSEY DEPARTMENT OF HEALTH & SENIOR SERVICES

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### FREQUENTLY ASKED QUESTIONS ABOUT NEW JERSEY STATE CANCER REGISTRY DATA

#### **What are the most recent cancer data?**

New Jersey law requires that in-state hospitals, physicians, dentists and independent clinical laboratories report all new cases of cancer within six months of diagnosis. The law does not cover out-of-state hospitals, but we do receive data on New Jersey cases from other states. These cases are reported first to their respective State Cancer Registries and then the New Jersey State Cancer Registry (NJSCR), so reporting of these cases is delayed. After the cases are received, they must be carefully checked and processed by the NJSCR. Therefore, it usually takes from 12 to 18 months after the end of a diagnosis year for the information on new cases to be available for statistical analysis.

#### **How far back are cancer data available?**

The NJSCR, a population-based registry, has collected data on all cancer cases diagnosed and/or treated in New Jersey residents since October 1, 1978. The first full year of cancer incidence data available, are for the year 1979. New Jersey cancer mortality data are available starting for the year 1969.

#### **What is an incidence rate?**

The term incidence refers to the number of newly diagnosed cases of a disease occurring in a specific population during a specific time period. The incidence rate is the number of newly diagnosed cases in a specific population during a specific time period per x number of people; usually the time period is one year and x number of people is 100,000. Such an incidence rate is crude, that is, it is not age adjusted (see below) and therefore cannot be used to compare different populations or years.

#### **What is an age-specific incidence rate?**

An age-specific incidence rate is the number of newly diagnosed cases of a disease in a specific age group in a specific population over a specified time period per x number of people in that age group. Typically, five-year age groups (0-4, 5-9, 10-14, etc.) are used. The time period is usually one year and the x number of people in the specific age group is usually 100,000.

#### **What is an age-adjusted incidence rate?**

An age-adjusted rate is different from a crude rate in that the incidence rate is modified to take into account how the age distribution of the population of interest varies from a conventionally used standard population. Calculation of cancer rates is based on the 2000 U.S. population standard. It is important that the same standard population be used so that age-adjusted rates can be compared to each other.

**How do I make comparisons between rates?**

Cancer is an age-related disease, and typically, the incidence rate of different types of cancer increases with age. A non-age-adjusted or crude rate does not take account of the age distribution and cannot be used to compare rates among populations with different age distributions. Comparisons can only be made after taking into account the different proportions of the population in each age group. Therefore, only rates adjusted to the same standard population can be compared to one another.

**What is a mortality rate, age-specific mortality rate, and age-adjusted mortality rate?**

Mortality rates are like the incidence rate, age-specific incidence rate, and age-adjusted incidence rate, except deaths rather than newly diagnosed cases are the numerator.

**Why are male and female rates shown separately?**

Men and women experience different cancer patterns. Some of the most common cancers occur in organs that are present only in either men (e.g. prostate) or women (e.g. ovary or cervix). Other types of cancer (such as lung) show large differences in the rates between men and women. It is standard practice to report rates separately for the two genders.

**Are *in situ* cancers routinely included in cancer incidence data?**

All primary invasive and *in situ* cancers are reportable to the NJSCR, except cervical cancer *in situ* diagnosed after 1994. According to standard practice for the publication of cancer rates, incidence data do not include *in situ* cancers except for *in situ* bladder cancers. If needed, *in situ* cancer statistics can be requested from the NJSCR.

**Why are cancer counts and rates suppressed if less than five?**

Cancer counts and rates are suppressed (unavailable) when there are fewer than five cases to ensure confidentiality and statistical reliability. Annual rates for relatively uncommon cancers tend to fluctuate substantially from year to year when there are small numbers, particularly in minority populations. Rates generated from small numbers should be interpreted with caution.

**Are data available for smaller geographic units, such as county and town?**

County cancer rates for the most currently released years of data from the New Jersey State Cancer Registry (NJSCR) are available on our mapping website at <http://www.cancer-rates.info/nj/>. Municipality cancer rates for the ten most populated municipalities in New Jersey will be available on our website soon.

**How can I get cancer data other than what is available on the website?**

Contact Cancer Epidemiology Services at (609) 588-3500 or through our website by clicking on the "Contact Us" box and filling out the appropriate fields. Our staff is available to discuss your cancer data needs with you.